

This is a very, very important issue. As I have sat and listened to the various presentations here, it occurs to me that, when a patient is admitted to a hospital, one of the first things that happens is that we take the history, and we want to know all of the individual signs and all of the individual differences of that patient.

I wonder how the HMOs and the insurance companies can reconcile deciding that one size fits all after one goes to the extent of trying to determine what the individual differences are. Because it makes a difference in the way one begins to treat that patient.

We have forgotten that in this industry. As a matter of fact, I am beginning to wonder if we have forgotten the patient altogether, because the insurance companies will place the physician out there with their instructions and almost dare them not to do anything else.

The physicians are held accountable, not the insurance companies that dictate what they must do. That is not American. Nothing in the history of medicine in this country has allowed something like that to happen.

In the past, when a physician graduated and met the standardized test and assured the Nation that they had that body of knowledge mastered, they had permission to practice medicine. They no longer have that under the HMOs. They have to take the dictation from that HMO. Yet, they can be held accountable by the patients and the patients' family, but not the HMO that dictates it.

That is the most unfair thing that I have heard of. I cannot even imagine this being something that is happening as a routine way of doing business in health care delivery in this country, the super nation, the number one nation in the world, the 911 for the rest of the world, the Nation that every other nation expects to come to their rescue, and yet we cannot respect the patient as an individual. That is beyond my comprehension. This really has gone too far.

The mere fact that we do not have the opportunity to bring back a course of doing business, this measure to the floor for honest debate is again un-American. It is unfortunate that we have to sign a discharge petition. I do not like the process of signing a discharge petition. We are placed in a position to do that.

All 435 Members of this body will acknowledge that this is a problem in this Nation; and yet, we have to go to discharge petition signing to bring this measure to the floor. That is very difficult to believe. But, yet, I will proudly join the group next Wednesday and sign this discharge petition because this is a number one concern of the people of this Nation.

No one wants to feel that, if they had an emergency and go to the emergency room, they might be rationed in what might be the approach if it is felt that it might cost the insurance company

too much if they began a procedure that might be too expensive.

We have had testimony that there have been times when physicians were actually complimented because a patient died in the emergency room which saved money for the insurance company. Does this sound like America? Does this sound like the Nation that has brought forth some of the most innovative measures and approaches to any disease, more so than anywhere else in the world; and, yet, the people of this Nation have no access to that success. Yet, all of us have participated in paying for it because all of us pay for medical research.

We simply must address this issue for what it is. If all of us went into a department store to get a suit, we would not want a suit that would fit anybody, we would want a suit that would fit us. That is what we want when we get sick. We do not want a one size fits all. We do not want it to be just a diagnosis that must follow the script verbatim.

We have to get back to looking at patients as individuals and making sure that they get the treatment they deserve. All that we can say about this when it comes right down to it, people pay for their care. They pay for their care, and they do not pay for it for the purpose of insurance companies having a lot of money to invest so they can take a lot of money home. They pay for it because it is a service, a service that members of that insurance company of that particular plan should have access to the needed care.

We are not talking about abuse of care. There are many measures that can determine that. We are talking about essential basic care that an individual deserves to have when that individual becomes ill. We are talking about looking at that patient's history and making sure that that is considered when the doctors orders are written, not just to pull out a preprinted sheet and follow it simply because that is what the insurance company dictated. Yet, the biggest frightening scare is to be held accountable for what their dictating brings about.

There is something simply not right. This is a basic fundamental right that every patient ought to have is access to care where they are considered as an individual. There is a difference between a 25 year old and a 75 year old; and, therefore, often the approach to that patient's diagnosis, although it might be the same, might be a little bit different.

When we get away from that as a Nation, we have forgotten where we started, what this really is. This is really the health care industry. This is the industry that we are supposed to be able to have confidence to put our very lives in the hand of professional providers and feel certain that we can trust it, not just a simple sheet of paper that, if the doctor not follow it verbatim, then they are out a good stead with the insurance company. It is out of control, and we simply must do something about it.

I thank the gentleman from New Jersey (Mr. PALLONE) very much for having this special order. I do not think we can talk enough about this subject. This is basic and fundamental to every human being being seen as a human being in this country.

Mr. PALLONE. Mr. Speaker, I want to thank the gentlewoman from Texas and particularly when she points out that, from the practitioner's point of view, whether it is the physician or the nurse, that essentially they cannot practice medicine because of the straight jacket essentially that has been put on them many times by HMOs, managed care organizations. I think a lot of people do not understand that. It is important.

Ms. EDDIE BERNICE JOHNSON of Texas. Mr. Speaker, the responsibility is still there, but they cannot make an independent decision.

Mr. PALLONE. We cannot have it. We have to have an end to that. I agree with the gentlewoman.

Mr. Speaker, I yield to the gentlewoman from Illinois (Ms. SCHAKOWSKY), who is a member of our Health Care Task Force and been working very hard to try to make sure that we are able to vote on this Patients' Bill of Rights and to articulate to our constituents what this is all about.

Ms. SCHAKOWSKY. Mr. Speaker, I thank the gentleman from New Jersey very much for the opportunity to participate in this discussion and look forward to the successful efforts for all of us on this floor to be able to debate and vote on a comprehensive Patients' Bill of Rights.

It is hard for me to imagine that there is anybody in this body who has not received lots of mail from their constituents about the abuses that are taking place every day. I have been hearing both from people who give care, nurses and physicians, and people who receive care, who are seeking the care, the patients.

I want to give my colleagues one example of a heartbreaking letter that I received. It starts,

DEAR REPRESENTATIVE SCHAKOWSKY, I am a 31-year-old nurse with breast cancer. Because I am an HMO member, I have had recurrent problems with receiving health care. As a patient, I have not yet received compromised care, but I have been denied services or have been told where to get care and who could give me care. I recently also was made to change primary doctors, giving up one that I had for 8 years because of my HMO.

I heard you speak on behalf of the Patients' Bill of Rights, and I need you to know that, as a health care provider and receiver and HMO member, I am certain that care is being compromised and restricted and refused to us.

I am knowledgeable about the health care system, and I am still able to be my own advocate, but I am sure 1 day I will not be able to make telephone calls endlessly pleading for standard of care. Who will do it for me? Why do I need to beg for treatments or for the right to remain in the care of my own doctor?

I am receiving follow-up care from my oncologists after having a stem cell transplant for metastatic breast cancer, and I am